

Contract Attachment No. 31

LOCAL AGENCY: **Barton County Health Department**

PROGRAM: **Pregnancy Maintenance Initiative**

TERM: **Until Rescinded**

AMOUNT: **Per List of Grant Awards**

The undersigned parties agree that the following provisions of Contract Attachment No. 31 are hereby incorporated into the KDHE Aid To Local Universal Contract (Universal Contract) and made a part thereof.

STATE AGENCY AGREES TO:

1. Make payments for Pregnancy Maintenance Initiative services to the Local Agency as follows:
 - a. Pay 25% of the fiscal year grant amount as first quarter funding on or about July 1, or upon processing of this Contract Attachment if later than July 1 of each year. If the total award amount for the program period is \$2,000 or less, the entire amount will be paid on or about July 1 of each year.
 - b. Pay 12.5% of the fiscal year grant amount on or about October 1 of each year.
 - c. Pay 12.5% of the fiscal year grant amount, less any unexpended grant funds from prior quarters, on or about November 15; February 15; and May 15. Such payments will be made upon receipt and acceptance of quarterly Certified Expenditure Affidavit forms showing expenditures from grant and Local Agency funds and fees for services. Said payments may be increased upon receipt and acceptance of quarterly Certified Expenditure Affidavit forms showing additional approved expenditures from the grant funds.
 - d. Pay 12.5% of the fiscal year grant amount on or about January 1 and April 1 of each year. Such payments will be made after an evaluation is made to determine if grant funds previously advanced have been expended in accordance with grant objectives.
2. Forward to the Local Agency on or about July 1 of each year a copy of the Notice of Grant Award Amount and Summary of Program Objectives that contains the State Fiscal Year objectives.

LOCAL AGENCY AGREES TO:

3. Submit a budget on or about July 1 outlining projected expenditures for grant funds and Local Agency funds, which is to be approved by appropriate State Agency program staff, and is hereby incorporated in this Contract Attachment and made a part hereof. Failure to submit this budget may result in the withholding of future payments by the State Agency.
4. Provide Local Agency matching funds equal to or greater than 100% (1:1) of grant funds expended during the period July 1 through June 30 of each year.
5. Track real-time client demographics and service/encounter data via an approved web-based electronic data system as required and in accordance with the guidance provided by the State Agency. This client-encounter data will be the source for required reports.
6. Submit quarterly reports in Catalyst. Reports are due October 15 for the first quarter, January 15 for the 2nd quarter, April 15 for the 3rd quarter, and July 15 for the 4th quarter. The State Agency reserves the right to modify, in its sole discretion, the reporting requirements during the term of this agreement to meet applicable federal or state reporting requirements.
7. Submit to the State Agency, within fifteen (15) days after the end of each quarter of the Contract period, the quarterly Certified Expenditure Affidavit. Expenses are itemized as they relate to the budget that will be appended to the Contract Attachment No. 31. Grantee will utilize the State Agency's "Affidavit of Expenditures" form (The Aid-To-Local process) to report funds expended for each budget category.
8. Develop a PMI manual that meets the program requirements outlined in the State Agency's PMI manual.
9. Use evidence-based practices in their work with pregnant women.
10. Develop a program evaluation process that includes the use of community data and information from the Client Satisfaction Survey process to measure program impact.
11. Engage in public awareness activities and develop a referral network of related service providers.
12. Create and maintain a functioning advisory group to assist in program development and evaluation activities.
13. Ensure the PMI Program Manager's participation in any scheduled site visits provided by the State Agency's program staff.

IT IS MUTUALLY AGREED THAT:

14. This Contract Attachment No. 31 supersedes any prior Contract Attachment No. 31.

15. Tender and acceptance of the first payment of the fiscal year shall constitute formal acceptance of the terms of the program objectives, which shall be incorporated by reference into the Universal Contract.
16. Failure to comply with this Contract Attachment No. 31 may result in reduction of funds or cancellation of the Contract Attachment No. 31.

Secretary: S. Mosier
Susan Mosier, MD
Kansas Department of Health & Environment

Date: 8/24/15

Authorized Signature: Shelly R. Schneider, BSN, RN
Barton County Health Department

Printed Name: Shelly R. Schneider, BSN, RN

Title: Administrator

Date: 7/1/15

REVIEWED
and
APPROVED
By Rebecka Boeck
7-28-15

Contract Attachment No. 31

LOCAL AGENCY: Catholic Charities, Inc.

PROGRAM: Pregnancy Maintenance Initiative

TERM: Until Rescinded

AMOUNT: Per List of Grant Awards

The undersigned parties agree that the following provisions of Contract Attachment No. 31 are hereby incorporated into the KDHE Aid To Local Universal Contract (Universal Contract) and made a part thereof.

STATE AGENCY AGREES TO:

1. Make payments for Pregnancy Maintenance Initiative services to the Local Agency as follows:
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10. Develop a program evaluation process that includes the use of community data and information from the Client Satisfaction Survey process to measure program impact.
11. Engage in public awareness activities and develop a referral network of related service providers.
12. Create and maintain a functioning advisory group to assist in program development and evaluation activities.
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Secretary: Susan Mosier
Susan Mosier, MD
Kansas Department of Health & Environment

Date: 7/31/15

Authorized Signature: Michael C. Burrus
Catholic Charities, Inc.

Printed Name: Michael C. Burrus

Title: Exec. Dir.

Date: 7/1/15

Contract Attachment No. 31

LOCAL AGENCY: Catholic Charities of Northeast Kansas

PROGRAM: Pregnancy Maintenance Initiative

TERM: Until Rescinded

AMOUNT: Per List of Grant Awards

The undersigned parties agree that the following provisions of Contract Attachment No. 31 are hereby incorporated into the KDHE Aid To Local Universal Contract (Universal Contract) and made a part thereof.

STATE AGENCY AGREES TO:

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LOCAL AGENCY AGREES TO:

3. Submit a budget on or about July 1 outlining projected expenditures for grant funds and Local Agency funds, which is to be approved by appropriate State Agency program staff, and is hereby incorporated in this Contract Attachment and made a part hereof. Failure to submit this budget may result in the withholding of future payments by the State Agency.
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8. Develop a PMI manual that meets the program requirements outlined in the State Agency's PMI manual.
9. Use evidence-based practices in their work with pregnant women.
10. Develop a program evaluation process that includes the use of community data and information from the Client Satisfaction Survey process to measure program impact.
11. Engage in public awareness activities and develop a referral network of related service providers.
12. Create and maintain a functioning advisory group to assist in program development and evaluation activities.
13. Ensure the PMI Program Manager's participation in any scheduled site visits provided by the State Agency's program staff.

IT IS MUTUALLY AGREED THAT:

14. This Contract Attachment No. 31 supersedes any prior Contract Attachment No. 31.

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Secretary: S. Mosier
Susan Mosier, MD
Kansas Department of Health & Environment

Date: 7/10/15

Authorized Signature: Ka L L
Catholic Charities of Northeast Kansas

Printed Name: Ken Williams

Title: President & CEO

Date: 6/29/2015

Contract Attachment No. 31

LOCAL AGENCY: Catholic Charities of Salina
PROGRAM: Pregnancy Maintenance Initiative
TERM: Until Rescinded
AMOUNT: Per List of Grant Awards

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STATE AGENCY AGREES TO:

1. Make payments for Pregnancy Maintenance Initiative services to the Local Agency as follows:
 - a. Pay 25% of the fiscal year grant amount as first quarter funding on or about July 1, or upon processing of this Contract Attachment if later than July 1 of each year. If the total award amount for the program period is \$2,000 or less, the entire amount will be paid on or about July 1 of each year.
 - b. Pay 12.5% of the fiscal year grant amount on or about October 1 of each year.
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Secretary: Susan Mosier
Susan Mosier, MD
Kansas Department of Health & Environment

Date: 7/10/15

Authorized Signature: Michelle L. Martin
Catholic Charities of Salina

Printed Name: Michelle L. Martin

Title: CEO/Executive Director

Date: 6.25.15

Contract Attachment No. 31

LOCAL AGENCY: Catholic Social Service

PROGRAM: Pregnancy Maintenance Initiative

TERM: Until Rescinded

AMOUNT: Per List of Grant Awards

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STATE AGENCY AGREES TO:

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Secretary: S. Mosier
Susan Mosier, MD
Kansas Department of Health & Environment

Date: 7/10/15

Authorized Signature: Deborah J Snapp
Catholic Social Service

Printed Name: Deborah J Snapp

Title: Executive Director

Date: 6/30/2015

Contract Attachment No. 31

LOCAL AGENCY: Family Life Services

PROGRAM: Pregnancy Maintenance Initiative

TERM: Until Rescinded

AMOUNT: Per List of Grant Awards

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Secretary: Susan Mosier
Susan Mosier, MD
Kansas Department of Health & Environment

Date: 7/10/15

Authorized Signature: Tim Durham
Family Life Services

Printed Name: Tim Durham

Title: Director

Date: 6-24-15

Contract Attachment No. 31

LOCAL AGENCY: Gerard House, Inc.

PROGRAM: Pregnancy Maintenance Initiative

TERM: Until Rescinded

AMOUNT: Per List of Grant Awards

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Secretary: Su Marin
Susan Mosier, MD
Kansas Department of Health & Environment

Date: 7/10/15

Authorized Signature: [Signature]
Gerard House, Inc.

Printed Name: Monica Coen

Title: Chief Therapeutic Officer

Date: 6-29-15

Contract Attachment No. 31

LOCAL AGENCY: Leavenworth County Health Department

PROGRAM: Pregnancy Maintenance Initiative

TERM: Until Rescinded

AMOUNT: Per List of Grant Awards

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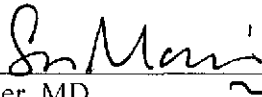
LOCAL AGENCY AGREES TO:

3. Submit a budget on or about July 1 outlining projected expenditures for grant funds and Local Agency funds, which is to be approved by appropriate State Agency program staff, and is hereby incorporated in this Contract Attachment and made a part hereof. Failure to submit this budget may result in the withholding of future payments by the State Agency.
4. Provide Local Agency matching funds equal to or greater than 100% (1:1) of grant funds expended during the period July 1 through June 30 of each year.
5. Track real-time client demographics and service/encounter data via an approved web-based electronic data system as required and in accordance with the guidance provided by the State Agency. This client-encounter data will be the source for required reports.
6. Submit quarterly reports in Catalyst. Reports are due October 15 for the first quarter, January 15 for the 2nd quarter, April 15 for the 3rd quarter, and July 15 for the 4th quarter. The State Agency reserves the right to modify, in its sole discretion, the reporting requirements during the term of this agreement to meet applicable federal or state reporting requirements.
7. Submit to the State Agency, within fifteen (15) days after the end of each quarter of the Contract period, the quarterly Certified Expenditure Affidavit. Expenses are itemized as they relate to the budget that will be appended to the Contract Attachment No. 31. Grantee will utilize the State Agency's "Affidavit of Expenditures" form (The Aid-To-Local process) to report funds expended for each budget category.
8. Develop a PMI manual that meets the program requirements outlined in the State Agency's PMI manual.
9. Use evidence-based practices in their work with pregnant women.
10. Develop a program evaluation process that includes the use of community data and information from the Client Satisfaction Survey process to measure program impact.
11. Engage in public awareness activities and develop a referral network of related service providers.
12. Create and maintain a functioning advisory group to assist in program development and evaluation activities.
13. Ensure the PMI Program Manager's participation in any scheduled site visits provided by the State Agency's program staff.

IT IS MUTUALLY AGREED THAT:

14. This Contract Attachment No. 31 supersedes any prior Contract Attachment No. 31.

15. Tender and acceptance of the first payment of the fiscal year shall constitute formal acceptance of the terms of the program objectives, which shall be incorporated by reference into the Universal Contract.
16. Failure to comply with this Contract Attachment No. 31 may result in reduction of funds or cancellation of the Contract Attachment No. 31.

Secretary: 
Susan Mosier, MD
Kansas Department of Health & Environment

Date: 7/31/15

Authorized Signature: 
Leavenworth County Health Department

Printed Name: JAMIE A MILLER

Title: DIRECTOR

Date: 7-1-15

Contract Attachment No. 31

LOCAL AGENCY: Wyandotte Pregnancy Clinic

PROGRAM: Pregnancy Maintenance Initiative

TERM: Until Rescinded

AMOUNT: Per List of Grant Awards

The undersigned parties agree that the following provisions of Contract Attachment No. 31 are hereby incorporated into the KDHE Aid To Local Universal Contract (Universal Contract) and made a part thereof.

STATE AGENCY AGREES TO:

1. Make payments for Pregnancy Maintenance Initiative services to the Local Agency as follows:
 - a. Pay 25% of the fiscal year grant amount as first quarter funding on or about July 1, or upon processing of this Contract Attachment if later than July 1 of each year. If the total award amount for the program period is \$2,000 or less, the entire amount will be paid on or about July 1 of each year.
 - b. Pay 12.5% of the fiscal year grant amount on or about October 1 of each year.
 - c. Pay 12.5% of the fiscal year grant amount, less any unexpended grant funds from prior quarters, on or about November 15; February 15; and May 15. Such payments will be made upon receipt and acceptance of quarterly Certified Expenditure Affidavit forms showing expenditures from grant and Local Agency funds and fees for services. Said payments may be increased upon receipt and acceptance of quarterly Certified Expenditure Affidavit forms showing additional approved expenditures from the grant funds.
 - d. Pay 12.5% of the fiscal year grant amount on or about January 1 and April 1 of each year. Such payments will be made after an evaluation is made to determine if grant funds previously advanced have been expended in accordance with grant objectives.
2. Forward to the Local Agency on or about July 1 of each year a copy of the Notice of Grant Award Amount and Summary of Program Objectives that contains the State Fiscal Year objectives.

LOCAL AGENCY AGREES TO:

3. Submit a budget on or about July 1 outlining projected expenditures for grant funds and Local Agency funds, which is to be approved by appropriate State Agency program staff, and is hereby incorporated in this Contract Attachment and made a part hereof. Failure to submit this budget may result in the withholding of future payments by the State Agency.
4. Provide Local Agency matching funds equal to or greater than 100% (1:1) of grant funds expended during the period July 1 through June 30 of each year.
5. Track real-time client demographics and service/encounter data via an approved web-based electronic data system as required and in accordance with the guidance provided by the State Agency. This client-encounter data will be the source for required reports.
6. Submit quarterly reports in Catalyst. Reports are due October 15 for the first quarter, January 15 for the 2nd quarter, April 15 for the 3rd quarter, and July 15 for the 4th quarter. The State Agency reserves the right to modify, in its sole discretion, the reporting requirements during the term of this agreement to meet applicable federal or state reporting requirements.
7. Submit to the State Agency, within fifteen (15) days after the end of each quarter of the Contract period, the quarterly Certified Expenditure Affidavit. Expenses are itemized as they relate to the budget that will be appended to the Contract Attachment No. 31. Grantee will utilize the State Agency's "Affidavit of Expenditures" form (The Aid-To-Local process) to report funds expended for each budget category.
8. Develop a PMI manual that meets the program requirements outlined in the State Agency's PMI manual.
9. Use evidence-based practices in their work with pregnant women.
10. Develop a program evaluation process that includes the use of community data and information from the Client Satisfaction Survey process to measure program impact.
11. Engage in public awareness activities and develop a referral network of related service providers.
12. Create and maintain a functioning advisory group to assist in program development and evaluation activities.
13. Ensure the PMI Program Manager's participation in any scheduled site visits provided by the State Agency's program staff.

IT IS MUTUALLY AGREED THAT:

14. This Contract Attachment No. 31 supersedes any prior Contract Attachment No. 31.

15. Tender and acceptance of the first payment of the fiscal year shall constitute formal acceptance of the terms of the program objectives, which shall be incorporated by reference into the Universal Contract.
16. Failure to comply with this Contract Attachment No. 31 may result in reduction of funds or cancellation of the Contract Attachment No. 31.

Secretary: S. Mosier
Susan Mosier, MD
Kansas Department of Health & Environment

Date: 5/10/15

Authorized Signature: Donna Kelsey
Wyandotte Pregnancy Clinic

Printed Name: Donna Kelsey

Title: Executive Director

Date: 6/26/15